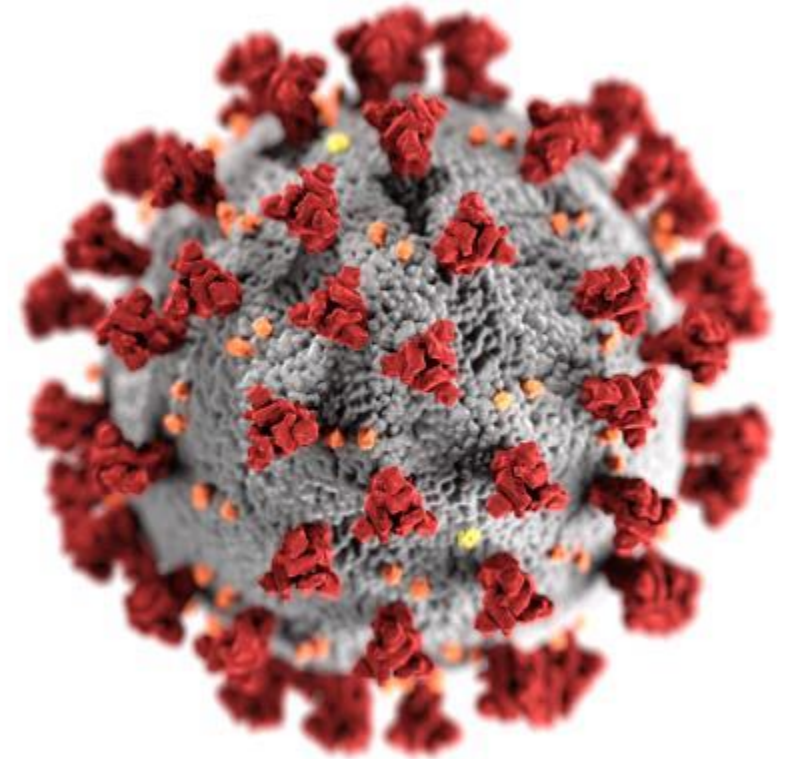


COVID-19 Vaccination Plan

South Dakota Department of Health

February 9, 2021



We will begin in just a few moments. Thanks!

Information is current as of 02.08.2021

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

This is an **emerging, rapidly evolving situation**. Information in this presentation is current as of February 08, 2021. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](https://covid.sd.gov)

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

Agenda

Update on Vaccination – Tim Heath

SDIIS Updates – Brett Oakland

Training Update – Carol Chalcraft

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

Update on Vaccination

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

Doses Administered

Total Doses Administered

125,321

Manufacturer	Number of Doses
Moderna	66,272
Pfizer	59,049

Total Persons Administered a Vaccine

86,304

Doses	Number of Recipients
Moderna - 1 dose	25,346
Moderna - Series Complete	20,463
Pfizer - 1 dose	20,463
Pfizer - Series Complete	18,554

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

SD DOSES Received

Pfizer 1	42,900
Pfizer 2	24,375
Moderna 1	55,200
Moderna 2	35,200
LTC Pharm	21,450
Total	153,450

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SOUTH DAKOTA DEPARTMENT OF HEALTH

SD DOSES Received

This Weeks 1 st dose shipments	14,525
This Weeks 2 nd dose Shipments	11,150
Doses At Pharmacy	9,477
Second Dose to be given this week	10,950

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Weekly 1st Doses Projected

Pfizer 5,850

Moderna 7,700

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Bonus Doses

Pfizer vaccine yields 6 doses – this will be a label change

Moderna vaccine may yield 1 or 2 extra doses

DO NOT POOL VACCINE FROM MULTIPLE VIALS

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Priority groups

https://doh.sd.gov/documents/COVID19/Vaccine/COVIDVaccineDistribution_Phase1.pdf

1A	19,265	22,292 Vaccinated
1B	10,867	2,934 Vaccinated-not including CVS/Walgreens
1C	49,642	21,663 Vaccinated
1D	265,561	26,949
1E	227,448	

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Expected COVID-19 Vaccine Availability for South Dakota Residents

Phase	Population Group	January	February	March	April	May-December
1A	Frontline healthcare workers and long-term care facility healthcare workers					
1B	Long-term care residents					
1C	EMS, public health workers, and other healthcare workers (lab & clinic staff)					
	Law enforcement, correctional officers					
we are here 1D	Persons aged 65 years and older <i>Starting (02/08/21) - Those 75 and over</i> <i>(Age to be lowered in 5-year increments as allocation allows)</i>					
	High risk patients - dialysis, post-transplant, and active cancer					
	High risk residents in congregate settings					
	Persons with 2 or more underlying medical conditions under the age of 65					
	Teachers and other school/college staff					
	Funeral service workers					
1E	Fire service personnel					
	Includes public-facing workers in essential and <u>critical infrastructure</u>					
Phase 2	All others 16 years and older					



Estimated Vaccine Availability

Note: Tribal vaccine allocation & administration is handled by the [IHS](#)
Veteran vaccine allocation & administration is handled by the [VA](#)

Due to limited allocation of the vaccine, the South Dakota Department of Health will use COVID-19 infection rates and will follow recommendations from the Advisory Committee on Immunization Practices (ACIP) to guide which counties will receive the vaccine first.



SOUTH DAKOTA
DEPARTMENT OF HEALTH

covid.sd.gov

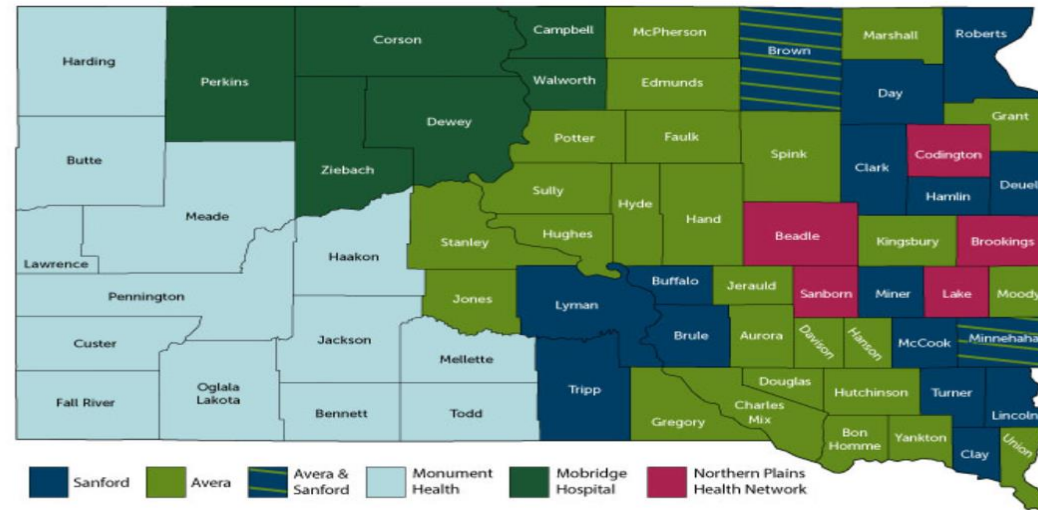
ASOF 02-03-21

COVID-19 VACCINE PROVIDERS

Please check the [Priority Groups Infographic](#) to find out which group you are in (we are currently on Group C).

VACCINE PROVIDERS BY COUNTY

The map below is best viewed on a desktop/laptop computer or in landscape mode on mobile (i.e. holding the phone sideways).



COVID-19 Vaccine Providers:

[Avera Health](#)

[Monument Health](#)

[Mobridge Hospital](#)

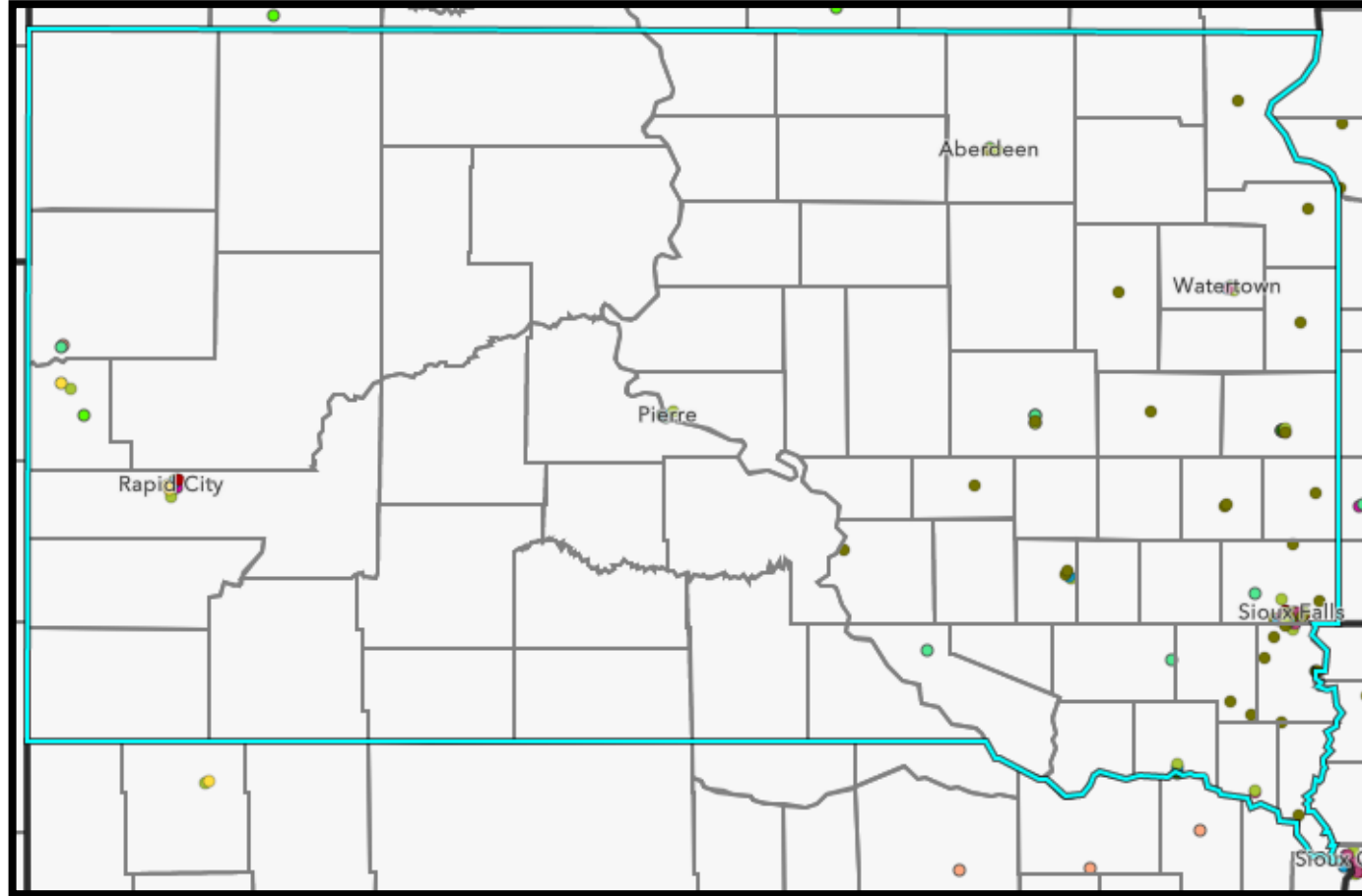
[Sanford Health](#)

Northern Plains Health Network: [Beadle & Sanborn](#) | [Brookings](#) | [Codington](#) | [Lake](#)

[VaccineFinder.org](#) will be updated once COVID-19 vaccination is widely available to the public to help direct people to find a vaccine provider near them.

Not intended for press or for reporting purposes.

South Dakota: All Federal Pharmacy Partners



- | | |
|-----------------------------|---------------|
| ● CVS | ● Cardinal |
| ● Walgreens | ● Topco |
| ● Walmart | ● CPESN |
| ● Rite Aid | ● ABC |
| ● Kroger Corporate Pharmacy | ● MHA |
| ● Albertsons | ● Health Mart |
| ● Publix Super Markets | ● Gerimed |
| ● Retail Business Services | ● Innovatix |
| ● COSTCO | |
| ● H-E-B | |
| ● Hy-Vee | |
| ● Meijer Pharmacy | |
| ● Southeastern Grocers | |
| ● PharMerica | |
| ● Lewis Drug | |

DRAFT – PRE-DECISIONAL & DELIBERATIVE

Not intended for press or for reporting purposes.

Federal Partners in SD

	First Dose	Second Dose	Total
BOP	100	1	101
VA	6,856	1,539	8,395
IHS	10,168	2,943	13,111
DOD	1,363	210	1,573

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

Janssen/Johnson & Johnson Vaccine

- **Have applied for EUA**
- **FDA to meet on February 26**
- **Viral Vector vaccine**
- **5 dose vials**

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SOUTH DAKOTA DEPARTMENT OF HEALTH

SDIIS Updates

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

South Dakota Immunization Information System (SDIIS)

- ***SDIIS Training:*** <https://doh.sd.gov/COVID/Vaccine/Providers.aspx>
 - The following trainings are available for new users and serve as a review for skilled users. Data Entry staff, whether vaccinators or ancillary staff, should view, at minimum, Trainings 1, 2, and 3. Staff tasked with Data Entry and Inventory Management, e.g. Vaccine Coordinators, should view all SDIIS trainings.
- [User Application](#) (next slide)
 1. [Login and Settings](#) (updated 12/02/20)
 2. [Search for Patients and Edit Information](#) (updated 02/08/21)
 3. [Give Vaccine](#) (updated 01/11/21)
 4. [Ordering and Receiving](#) (updated 02/01/21)
 5. [Inventory Management](#) (updated 12/28/20)
 - 5a. [Wastage Reconciliation](#) (01/26/21)
 6. [Vaccine Transfer](#) (updated 01/12/21)
 7. [Patient Detail Report](#) (01/05/21)

South Dakota Immunization Information System (SDIIS)

South Dakota Immunization Information System (SDIIS) USER ACCESS ACCOUNT APPLICATION

Please complete this form to request a user account for each staff member who needs access to the SDIIS. Upon completion and return of this form, a USER ID and temporary PASSWORD will be assigned. Once the credentials have been assigned, we recommend you change your password after you log in for the first time. Password: Passwords should be AT LEAST characters and include a combination of letters, numbers, and special characters. **PLEASE DO NOT SHARE PASSWORDS AND USER ACCOUNTS.** If you have questions, please contact Brett Oakland at (605) 367-4902 or Radhi Saripalli at (605) 773-7473. Retain a copy of this form in your files and email the completed form to brett.oakland@state.sd.us or fax to (605) 367-5357.

SDIIS USER ACCESS ACCOUNT INFORMATION

First Name: _____ Last Name: _____
(List your name as you'd like to see it displayed in the Immunization Information System)

Name of Clinic/ Facility: _____

SDIIS PIN: _____ Phone Number: _____ Ext. _____

Individual Email Address: _____
(Shared email accounts are not acceptable)

Access Required: ☐ New User ☐ Existing User

☐ View only – view and print record, but cannot add immunizations or edit record

☐ Data Entry - enter immunizations and edit patient records, but no access to inventory

☐ Inventory Management - enter immunizations, edit patient records, access to facility inventory

Does user float between clinic sites? (Check one): ☐ Yes ☐ No
(If yes, a separate application must be completed for each clinic)

VACCINATOR STATUS:

☐ I will be administering vaccinations for this facility.

I am: ☐ RN ☐ CMA ☐ PA ☐ Pharmacist ☐ Other
☐ LPN ☐ MD/DO ☐ NP ☐ Student

☐ I will NOT be administering vaccinations for this facility.

• SDIIS User Access Application

- **UPDATED:**
- Used to request access for new users to SDIIS
- Used for those who need view/enter data into the SDIIS
- **NEW:** Section regarding vaccinator status
- Has been added to Provider Education website
- <https://doh.sd.gov/COVID/Vaccine/Providers.aspx>

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

- ***COVID-19 Vaccine Data Entry Reminders***

- Use simple search parameters when searching for patients in SDIIS.
 - Use first initial and birthdate, or
 - Use first three letters of first and last name
 - Remember to search for full name vs. nickname – e.g. James vs. Jim
 - Please ensure that the name and birthdate match the person who is vaccinated. Check address and phone, anything to help confirm patient identity
 - Avoid creating duplicate records.
 - If multiple patient searches come up empty, then you may ADD NEW PATIENT
- When selecting priority group, DO NOT select Priority Group “**2nd Dose**” if patient record does not already have one dose
- Ensure that the 2nd dose of COVID-19 vaccine is the same brand as the first dose
- **ALL COVID-19 vaccine records in SDIIS must have an ADDRESS (City, State, Zip, County)**
- **ALL COVID-19 vaccine records in SDIIS must include GENDER, RACE, ETHNICITY (Hispanic Origin in SDIIS)**

Not intended for press or for reporting purposes.





SOUTH DAKOTA DEPARTMENT OF HEALTH

South Dakota Immunization Information System (SDIIS)

PRIORITY GROUP(S)

COVID-19-MOD
Dose #1

Please specify the priority group(s) applicable to this vaccination.

-  ☐ 2nd Dose(Check this box only)
- ☐ Frontline HCW (ED/ICU/COVID U)
- ☐ LTC Health Workers
- ☐ LTC Residents(NH/Assit.Living)
- ☐ Priority 1c
-  ☐ Priority 1d
- ☐ Priority 1e

UPDATE

CANCEL

• ***Pandemic Population Groups***

- For COVID-19 Vaccine: After entering COVID-19 vaccine, a **PRIORITY GROUP(S)** screen will appear
- Select the box of population group that best defines the recipient
- **2nd Dose** – choose this box if patient is receiving 2nd dose
- Click **UPDATE**
- Vaccine recipient may belong to multiple population groups. **Please only choose the one highest priority option.**
- **FIRST DOSE ONLY:** Priority Groups must be counted every day and reported to the **Daily Qualtrics Survey** found here: https://dohsd.sjc1.qualtrics.com/jfe/form/SV_5AN1S7ekyyQPovH . All groups must report by first thing the following day.
- **SECOND DOSE:** Priority Groups **WILL NOT BE** reported to the **Daily Qualtrics Survey**.



SOUTH DAKOTA DEPARTMENT OF HEALTH

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

SDIIS South Dakota Immunization Information System

PATIENT SUMMARY
USER NAME: Brett Oakland CLINIC: Central Registry

PATIENT INFORMATION
PATIENT ID: 140-00002-1505381
NAME: Bert Oak
ALIAS:
DOB: 1/1/1940 (80 years, 10 months)
GENDER:
HEALTH PLAN:
VFC:
STATUS: Active
CHART#:
[EDIT](#)

VACCINE HISTORY

VACCINE	#	DATE	ADV	ENT
NO VACCINES HAVE BEEN ADDED.				

[ADD HISTORY](#) [GIVE VACCINE](#) [EDIT HISTORY](#)

All Series

[RECOMMEND](#)

CONTACT INFORMATION
PARENT:
ADDRESS:
PRIMARY#:
PCP:
REMINDER:
[EDIT](#)

CONTRAINDICATIONS
NO CONTRAINDICATIONS ADDED.
[EDIT](#)

PATIENT NOTES

PRIORITY	DATE	NOTES
There are no notes.		

[ADD NEW NOTE](#)

QUALIFYING INTERVIEW
There are no qualifying interviews.

[DELETE PATIENT](#) [DONE](#)

- **Edit Patient Information**

- Click **EDIT** under PATIENT INFORMATION section
- The **EDIT PATIENT INFORMATION** screen will appear

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)



EDIT PATIENT INFORMATION

Bert Oak
DOB: 1/1/1940

RECORD INFORMATION	
SYSTEM IDENTIFIER : 140-00002-1505381	LAST CLINIC : Test Clinic 2010 (#7734)
DATE OF ENTRY : 11/9/2020 5:58:59 PM	LAST UPDATED : 11/11/2020 12:35:46 PM
PATIENT INFORMATION	
* LAST NAME : <input type="text" value="Oak"/>	* FIRST NAME : <input type="text" value="Bert"/>
MIDDLE NAME : <input type="text" value="Jim"/>	SUFFIX : <input type="text"/>
ALIAS (NICKNAME) : <input type="text" value="TESTRECORD"/>	* DATE OF BIRTH : <input type="text" value="1/1/1940"/> (mm/dd/yyyy)
STATE/COUNTRY OF BIRTH : <input type="text"/>	GENDER : <input type="text" value="Male"/>
RACE : Native American EDIT	HISPANIC ORIGIN : <input type="text" value="Non-Hispanic"/>
LANGUAGE : <input type="text"/>	* VFC ELIGIBILITY : <input type="text" value="Not Eligible"/>
OTHER PROGRAMS : EDIT	SOCIAL SECURITY # : <input type="text"/>
SCHOOL DISTRICT : <input type="text"/>	CONFIRM SSN : <input type="text"/>
OCCUPATION : <input type="text" value="SELECT"/>	PATIENT STATUS : <input type="text" value="Active"/>
CHART # : <input type="text"/>	HEALTH PLAN : EDIT

[UPDATE](#) [CANCEL](#)

• *Edit Patient Information*

- Please enter the following, which are **REQUIRED** for COVID-19 Vaccination Plan,
 - Confirm **name**, **date of birth**
 - **Gender**
 - **Race** – click **EDIT** and choose
 - **Ethnicity** – click **HISPANIC ORIGIN** dropdown
 - Choose non-Hispanic, if so
 - Choose Unknown Hispanic, if origin unknown
- VFC Eligibility – choose NOT ELIGIBLE for all adults; choose best option for 18 and under
 - Not required for COVID-19 vaccine documentation, but SDIIS requires this field to be completed.
- Click **UPDATE**

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

SDIIS South Dakota Immunization Information System

PATIENT SUMMARY
USER NAME: Brett Oakland CLINIC: Central Registry

PATIENT INFORMATION
PATIENT ID: 140-00002-1505381
NAME: Bert Oak
ALIAS:
DOB: 1/1/1940 (80 years, 10 months)
GENDER:
HEALTH PLAN:
VFC:
STATUS: Active
CHART#:
[EDIT](#)

VACCINE HISTORY

VACCINE	#	DATE	ADV	ENT
NO VACCINES HAVE BEEN ADDED.				

[ADD HISTORY](#) [GIVE VACCINE](#) [EDIT HISTORY](#)

[RECOMMEND](#)

CONTACT INFORMATION
PARENT:
ADDRESS:
PRIMARY#:
PCP:
REMINDER:
[EDIT](#)

CONTRAINDICATIONS
NO CONTRAINDICATIONS ADDED.
[EDIT](#)

PATIENT NOTES

PRIORITY	DATE	NOTES
There are no notes.		

[ADD NEW NOTE](#)

QUALIFYING INTERVIEW
There are no qualifying interviews.

[DELETE PATIENT](#) [DONE](#)

- **Edit Contact Information**
 - Click **EDIT** under CONTACT INFORMATION section
 - The **EDIT CONTACT & GENERAL INFORMATION** screen will appear

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

SEARCH PATIENTS
PRINT REPORTS
INVENTORY
MY SETTINGS
CLINIC SETTINGS
MAINTENANCE
TUTORIAL
LOG OUT

EDIT CONTACT & GENERAL INFORMATION

Bert Oak
DOB: 1/1/1940

PARENT AND GUARDIAN INFORMATION

MOTHER LAST NAME :	<input type="text"/>	MOTHER FIRST NAME :	<input type="text"/>
MOTHER MIDDLE NAME :	<input type="text"/>	MOTHER MAIDEN NAME :	<input type="text"/>
MOTHER SSN :	<input type="text"/>	CONFIRM SSN :	<input type="text"/>
FATHER LAST NAME :	<input type="text"/>	FATHER FIRST NAME :	<input type="text"/>
FATHER MIDDLE NAME :	<input type="text"/>	FATHER SSN :	<input type="text"/>
		CONFIRM SSN :	<input type="text"/>
GUARDIAN LAST NAME :	<input type="text"/>	GUARDIAN FIRST NAME :	<input type="text"/>
GUARDIAN MIDDLE NAME :	<input type="text"/>	GUARDIAN SSN :	<input type="text"/>
		CONFIRM SSN :	<input type="text"/>

PATIENT ADDRESS

PATIENT ADDRESS : 1234 Immunity Avenue
Sioux Falls (Part-Lincoln), South Dakota 57108 [EDIT](#)

COUNTY : Lincoln

PHONE NUMBERS

PRIMARY PHONE # : 6059999999 SECONDARY PHONE # : EXT.

REMINDER ACTIVITY

DATE REMINDER SENT : 11/11/2020 REMINDER STATUS : Pending

NEXT APPOINTMENT :

EXPANSION FIELDS

EXP. FIELD - INTEGER : EXP. FIELD - DATE :

EXP. FIELD - STRING : LOCKING : SELECT

PRIMARY CARE PHYSICIAN NAME

LAST NAME : FIRST NAME :

MIDDLE NAME : TITLE : SELECT

PRIMARY CARE PHYSICIAN ADDRESS

ADDRESS : [EDIT](#)

PRIMARY CARE PHYSICIAN PHONE NUMBER

PHONE # : EXT.

[UPDATE](#) [CANCEL](#)

• Edit Contact Information

- Please enter the following:
 - Parent & Guardian Information for clients under age 18 (SSN's not necessary)
 - **REQUIRED** for COVID-19 Vaccination Plan **PATIENT ADDRESS** – click **EDIT**
 - **EDIT PATIENT ADDRESS** screen will appear; see next slide.
 - Click **UPDATE** when address is complete
- Enter phone numbers – no dashes – XXXXXXXXXXXX
- May enter Primary Care Physician information, if known
- Click **UPDATE**

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

SDIIS South Dakota Immunization Information System

EDIT PATIENT ADDRESS

Bert Oak
DOB: 1/1/1940

PATIENT ADDRESS

ADDRESS LINE 1: 1234 Immunity Avenue X

SUITE:

ADDRESS LINE 2:

ZIP CODE: 57108

SUBMIT

STATE: South Dakota

COUNTY: Lincoln

CITY: Sioux Falls (Part-Lincoln)

UPDATE **CANCEL**

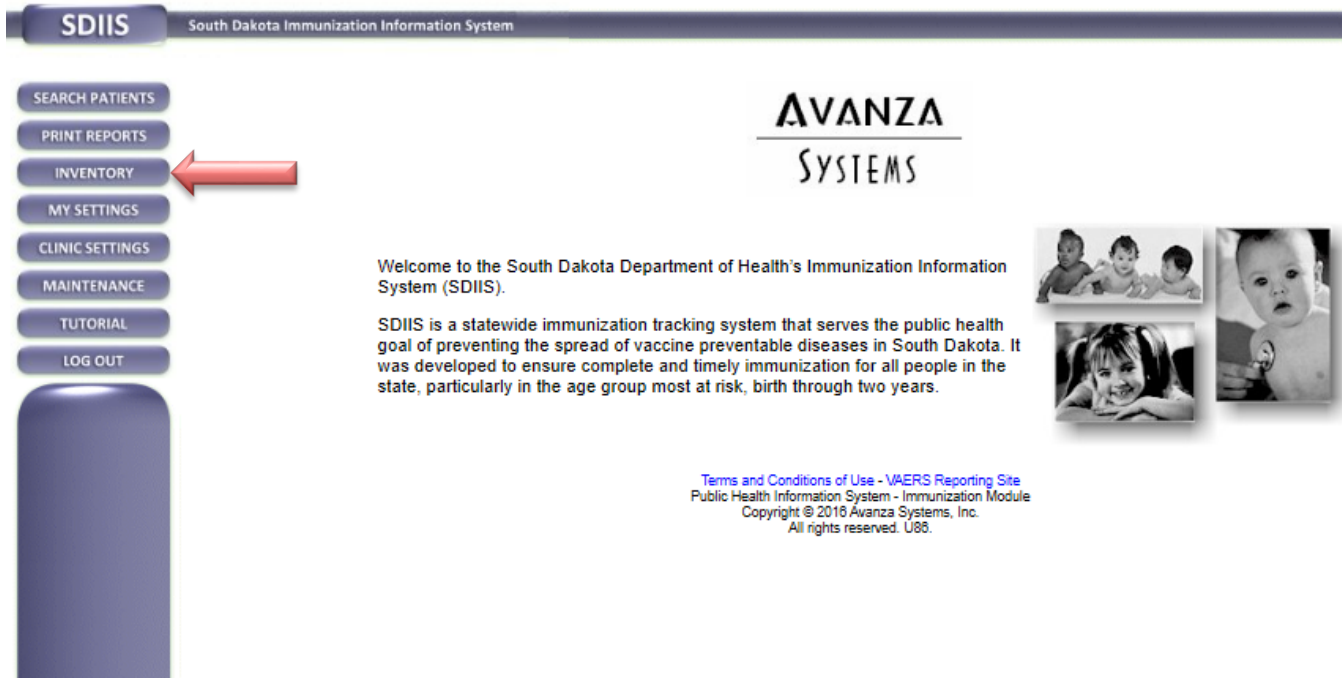
• **Edit Contact Information**

- Please enter the following:
 - **EDIT PATIENT ADDRESS** screen
 - Complete **ADDRESS** and **ZIP CODE** fields
 - Click **SUBMIT** next to the **ZIP CODE** field. The proper **state**, **county**, and **city** should be highlighted. If not, please correct.
 - **ADDRESS LINE 2** – Do not enter City, SD – this is for and extension of the street address, e.g., “PO Box xx”, “Apt #”, etc.
 - Click **UPDATE** when address is complete

- NOTE: If a recipient refuses to provide **ADDRESS** please obtain, at minimum, the **ZIP CODE**. With the **ZIP CODE** field, we can ascertain **state**, **county**, and **city**. You MUST click **SUBMIT** next to the zip code.

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South Dakota Immunization Information System (SDIIS)



- **Receiving Vaccine**
- **Part 3: Add Inventory**
 - To create an inventory item that is not allocated to your facility by SDDOH through VTrckS
 - Federal Retail Pharmacy Rollout Program
 - Other federal allocations: IHS, VA, etc.
 - Private vaccine
 - When your vaccine order arrives, select the **INVENTORY** button on the left-hand side of the screen.
 - The **EDIT INVENTORY** screen will appear.

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

EDIT INVENTORY

CHOOSE CLINIC

Test Clinic 2010 (#7734) ▼

VACCINE	FUNDING SOURCE	LOT NUMBER(S)	EXPIRATION DATE(S)	CURRENT VOLUME
Flu High Dose	Private	ZR979	03/28/2022	29
Men MPSV4	Private	ZR979	03/28/2022	-2
Tdap	Private	5S43T	03/05/2022	36
Varicella	VFC	1687291	09/11/2022	20
Zoster-Shingrix	Private	1621934	01/29/2022	17

Active ▼

ADD INVENTORY

SHIPMENTS

ORDERS

BATCHES

CLOSE INVENTORY

• *Part 3: Add Inventory*

- Verify that your clinic name is in the **CHOOSE CLINIC** field.
- Your current inventory is listed.
- Select the **ADD INVENTORY** button on the bottom of the **EDIT INVENTORY** screen

- The **ADD NEW INVENTORY** screen will appear.

Not intended for press or for reporting purposes.



SOUTH DAKOTA DEPARTMENT OF HEALTH

South Dakota Immunization Information System (SDIIS)

ADD NEW INVENTORY

CLINIC Test Clinic 2010 (#7734)	VACCINE * SELECT	SOURCE/VENDOR * SELECT	FUNDING SOURCE * SELECT
CURRENT VOLUME * <input type="text"/>	DOSAGE VOLUME * <input type="text" value="1"/>	MINIMUM VOLUME * <input type="text" value="0"/>	
<input checked="" type="checkbox"/> ACTIVE <input checked="" type="checkbox"/> RECOMMEND	NOTES <div></div>		

NEXT

CANCEL

ADD NEW INVENTORY

CLINIC Test Clinic 2010 (#7734)	VACCINE * COVID-19-MOD	SOURCE/VENDOR * Other	FUNDING SOURCE * Non-VFC
CURRENT VOLUME * <input type="text" value="200"/>	DOSAGE VOLUME * <input type="text" value="1"/>	MINIMUM VOLUME * <input type="text" value="0"/>	
<input checked="" type="checkbox"/> ACTIVE <input checked="" type="checkbox"/> RECOMMEND	NOTES Federal Retail Pharmacy Vaccine Rollout Program		

NEXT

CANCEL

• Part 3: Add Inventory

- **VACCINE** dropdown: choose name of vaccine item to add to inventory
- **SOURCE/VENDOR & FUNDING SOURCE**: There are no specific selections for COVID-19 vaccine, so choose best selections.
- **CURRENT VOLUME**: enter total doses received
- **DOSAGE VOLUME**: DO NOT change; must remain at 1.
- **MINIMUM VOLUME**: not relevant, leave at 0
- **ACTIVE & RECOMMEND** checkboxes – uncheck when lot usage is complete
- **NOTES**: add description
- Click **NEXT**
- The **SELECT LOTS** screen will appear



SOUTH DAKOTA DEPARTMENT OF HEALTH

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South Dakota Immunization Information System (SDIIS)

SELECT LOTS

MANUFACTURER : Moderna



SELECT	LOT NUMBER(S)	EXPIRATION DATE(S)	MANUFACTURER
<input type="checkbox"/>	004M20A	12/31/2069	Moderna
<input checked="" type="checkbox"/>	007M20A	12/31/2069	Moderna
<input type="checkbox"/>	010M20A	12/31/2069	Moderna
<input type="checkbox"/>	011J20A	12/31/2069	Moderna
<input type="checkbox"/>	011L20A	12/31/2069	Moderna
<input type="checkbox"/>	011M20A	12/31/2069	Moderna
<input type="checkbox"/>	012M20A	12/31/2069	Moderna
<input type="checkbox"/>	013L20A	12/31/2069	Moderna
<input type="checkbox"/>	025J20-2A	12/31/2069	Moderna
<input type="checkbox"/>	025L20A	12/31/2069	Moderna
<input type="checkbox"/>	030L20A	12/31/2069	Moderna
<input type="checkbox"/>	032L20A	12/31/2069	Moderna
<input type="checkbox"/>	041L20A	12/31/2069	Moderna
<input type="checkbox"/>	042L20A	12/31/2069	Moderna
<input type="checkbox"/>	043L20A	12/31/2069	Moderna

Active



ADD NEW LOT

ASSOCIATE LOT(S)

CANCEL

• *Part 3: Add Inventory*

- **MANUFACTURER** dropdown: select name of manufacturer to simplify list to include only lot numbers associated with manufacturer
- Check the box next to the lot number that matches the lot number of the shipment received.
- Click **ASSOCIATE LOT(S)** button
- The **EDIT INVENTORY ITEM** screen will appear

- If lot number is not in the list, click **ADD NEW LOT** button and complete **ADD NEW LOT** screen (no slides included)

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SOUTH DAKOTA DEPARTMENT OF HEALTH

South Dakota Immunization Information System (SDIIS)

EDIT INVENTORY ITEM

CLINIC Test Clinic 2010 (#7734)	VACCINE * COVID-19-MOD	SOURCE/VENDOR * Other	FUNDING SOURCE * Non-VFC
CURRENT VOLUME 200	VOLUME ADMINISTERED 0	DOSAGE VOLUME * 1	MINIMUM VOLUME * 0
<input checked="" type="checkbox"/> ACTIVE <input checked="" type="checkbox"/> RECOMMEND	NOTES Federal Retail Pharmacy Vaccine Rollout Program		
LOT INFORMATION			
LOT NUMBER	EXPIRATION DATE	NDC	MANUFACTURER
007M20A	12/31/2069	80777-0273-99(COV-19(Moderna))	Moderna
RECONCILIATION INFORMATION			
DATE	TYPE	VOLUME	NOTES
01/31/2021	Received	200	Initial Volume



• *Part 3: Add Inventory*

- Review information for accuracy
- Click **UPDATE** button
- The **EDIT INVENTORY** screen will appear

Not intended for press or for reporting purposes.

South Dakota Immunization Information System (SDIIS)

EDIT INVENTORY

CHOOSE CLINIC

Test Clinic 2010 (#7734) ▼

VACCINE	FUNDING SOURCE	LOT NUMBER(S)	EXPIRATION DATE(S)	CURRENT VOLUME
COVID-19-MOD	Non-VFC	007M20A	12/31/2069	200
Flu High Dose	Private	ZR979	03/28/2022	29
Men MPSV4	Private	ZR979	03/28/2022	-2
Tdap	Private	5S43T	03/05/2022	36
Varicella	VFC	1687291	09/11/2022	20
Zoster-Shingrix	Private	1621934	01/29/2022	17

Active ▼

ADD INVENTORY

SHIPMENTS

ORDERS

BATCHES

CLOSE INVENTORY

• *Part 3: Add Inventory*

- Item has been added to inventory
- Click **CLOSE INVENTORY** button
- HAPPY VACCINATING!!!

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Training Update

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Storage and handling updated info/resource:

- USP Tool Kit-resources for updated information.
- [COVID-19 Vaccine Handling Toolkit \(usp.org\)](https://www.usp.org/covid-19-vaccine-handling-toolkit)

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Reminder: Proper storage is critical

Shots gone bad: Residents at five **Ohio** facilities must get COVID-19 vaccine again after doses are stored wrong

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SOUTH DAKOTA DEPARTMENT OF HEALTH

Florida health department to audit county's handling of COVID-19 vaccines after 1,000 doses damaged.....

*Officials found that 1,160 doses of the vaccine were stored incorrectly in a **refrigerator that was turned off.***

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The Institute for Safe Medication Practices (ISMP) on Jan. 27 [released its list](#) of the top 10 medication errors from 2020.

All can be avoided or minimized through operational improvements.

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The 10 preventable medication errors:

1. Prescribing, dispensing and administering extended-release opioids to patients who are opioid-naïve
2. Not using smart infusion pumps with dose error-reduction systems in perioperative settings
3. Oxytocin errors
4. Hazards resulting from infusion pumps being positioned outside of COVID-19 patients' rooms
5. COVID-19 vaccine errors

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The 10 preventable medication errors:

6. Use of the “syringe pull-back” verification method during pharmacy sterile compounding
7. Combining or manipulating commercially available sterile products outside a pharmacy
8. Medication loss in the tubing when administering small-volume infusions with a primary administration set
9. Intraspinal injection errors with tranexamic acid
10. Use of error-prone abbreviations, symbols or dose designations

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ISMP COVID-19 vaccine errors since mid-December 2020.

- Dilution errors with Pfizer-BioNTech vaccine
 - led to overdoses when too little diluent was used
- Patients received (IM) monoclonal antibody instead of the Moderna vaccine
 - due to vague labeling of the monoclonal antibody
- Wasted vaccines from inefficient scheduling or “no shows”
- Administration to patients younger than indicated

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Contributing factors applicable from common flu vaccination errors

- look-alike vaccine names, labels, and packaging;
- unsegregated refrigerator/freezer storage;
- mixing/dilution errors;
- communication barriers with patients;
- not checking/documenting administration in the immunization information system (IIS);
- temperature excursions;
- and the inability to use technologies such as barcode scanning during mass immunizations.

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- Healthcare providers are **required by law to report** to [VAERS](#)
Any adverse event listed in the [VAERS Table of Reportable Events Following Vaccination](#) that occurs within the specified time period after vaccination

An adverse event listed by the vaccine manufacturer as a contraindication to further doses of the vaccine

- Healthcare providers are **strongly encouraged to report**:
Any adverse event that occurs after the administration of a vaccine licensed in the United States, whether or not it is clear that a vaccine caused the adverse event
Vaccine administration errors

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COVID-19 mRNA Vaccines



What Clinic Personnel Need to Know



	Pfizer-BioNTech	Moderna
Product	Pfizer-BioNTech COVID-19 Vaccine (BNT162b2)	Moderna COVID-19 Vaccine (mRNA-1273)
Vaccine type	mRNA (messenger RNA)	mRNA (messenger RNA)
Age indication	16 years of age and older	18 years of age and older
Basic information	<p>CDC Resources: Pfizer-BioNTech COVID-19 Overview www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/index.html</p> <p>ACIP Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine www.cdc.gov/mmwr/volumes/69/wr/mm6950e2.htm?s_cid=mm6950e2_w</p> <p>Pfizer-BioNTech Resources: Pfizer-BioNTech COVID-19 vaccine website www.cvdvaccine-us.com</p>	<p>CDC Resources: Moderna COVID-19 Overview www.cdc.gov/vaccines/covid-19/info-by-product/moderna/index.html</p> <p>ACIP Interim Recommendation for Use of Moderna COVID-19 Vaccine www.cdc.gov/mmwr/volumes/69/wr/mm695152e1.htm?s_cid=mm695152e1_w</p> <p>Moderna Resources: Moderna COVID-19 vaccine website www.modernatx.com/covid19vaccine-eua/providers/</p>
Emergency Use Authorization (EUA) factsheets Required to be given to recipients in place of a Vaccine Information Statement (VIS)	<p>For Providers www.fda.gov/media/144413/download</p> <p>For Recipients and Caregivers <i>English</i> www.fda.gov/media/144414/download</p> <p><i>Translations</i> www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/pfizer-biontech-covid-19-vaccine</p>	<p>For Providers www.fda.gov/media/144637/download</p> <p>For Recipients and Caregivers <i>English</i> www.fda.gov/media/144638/download</p> <p><i>Translations</i> www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/moderna-covid-19-vaccine</p>
Presentation	<ul style="list-style-type: none"> Frozen liquid concentrate, no preservative Multidose vial, at least 5 doses/vial* <p>* Some syringe types may be able to draw up to 6–7 full doses per vial, which is acceptable. Never combine vaccine from more than 1 vial to make a dose.</p>	<ul style="list-style-type: none"> Frozen liquid, no preservative Multidose vial, at least 10 doses/vial* <p>* Some syringe types may be able to draw up 11 full doses per vial, which is acceptable. Never combine vaccine from more than 1 vial to make a dose.</p>
Packaging	<ul style="list-style-type: none"> 195 vials/tray (975 doses) 1–5 trays per shipper Each tray: 9" x 9" x 1.6" 	<ul style="list-style-type: none"> 10 vials/carton (100 doses) Each carton: 2" x 2" x 5-3/8"
Minimum shipment	975 doses (195 multidose vials)	100 doses (10 multidose vials)

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	Pfizer-BioNTech	Moderna
Storage and handling	<p>SHIPPING Shipped at -80°C to -60°C (-112°F to -76°F)</p> <p>STORAGE (protect from light during storage) Frozen: -80°C to -60°C (-112°F to -76°F) In "ultracold" temperature freezer</p> <ul style="list-style-type: none"> Up to 6 months <p>In Pfizer thermal shipper with dry ice</p> <ul style="list-style-type: none"> Up to 30 days if following Pfizer instructions for dry ice replenishment and # of openings allowed/per day <p>Thermal Shipping Container Dry Ice Replenishment Instructions www.cvdvaccine-us.com/images/pdf/DryIceReplenishment.pdf</p> <p>Refrigerated: 2° to 8°C (36° to 46°F)</p> <ul style="list-style-type: none"> Unopened vial: up to 5 days (120 hours)/ must discard after 120 hours Unopened vial: up to 2 hours at room temperature (up to 25°C [77°F]) Punctured vial: up to 6 hours in refrigerator or at room temperature (2° to 25°C [36° to 77°F]) Thawed vaccine cannot be refrozen <p>.....</p> <p>CDC Resources: Storage and Handling Summary (Pfizer) www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/storage-summary.pdf</p> <p>Ultracold Vaccine Storage Temperature Log</p> <p>CELSIUS www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/temp-log-ultra-cold-storage-celsius.pdf</p> <p>FAHRENHEIT www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/temp-log-ultra-cold-storage-fahrenheit.pdf</p> <p>Refrigerator Vaccine Storage Temperature Log</p> <p>CELSIUS www.cdc.gov/vaccines/covid-19/downloads/refrigerator-storage-logger-celsius.pdf</p> <p>FAHRENHEIT www.cdc.gov/vaccines/covid-19/downloads/refrigerator-storage-logger-fahrenheit.pdf</p> <p>Pfizer Resource: Storage and handling guidance www.cvdvaccine-us.com/product-storage-and-dry-ice</p>	<p>SHIPPING Shipped at -25°C to -15°C (-13°F to 5°F)</p> <p>STORAGE (protect from light during storage) Frozen: -25°C to -15°C (-13°F to 5°F)</p> <ul style="list-style-type: none"> Up to 6 months If storing in freezer with other routinely recommended vaccines, carefully adjust freezer temperature range to THIS vaccine Do NOT store on dry ice <p>Refrigerated: 2°C to 8°C (36°F to 46°F)</p> <ul style="list-style-type: none"> Unopened vial: up to 30 days Unopened vial: up to 12 hours at room temperature (up to 25°C [77°F]) Punctured vial: up to 6 hours in refrigerator or at room temperature (2° to 25°C [36° to 77°F]) Thawed vaccine cannot be refrozen <p>.....</p> <p>CDC Resources: Storage and Handling Summary (Moderna) www.cdc.gov/vaccines/covid-19/info-by-product/moderna/downloads/storage-summary.pdf</p> <p>Freezer Vaccine Storage Temperature Log</p> <p>CELSIUS www.cdc.gov/vaccines/covid-19/info-by-product/moderna/downloads/temp-log-freezer-storage-celsius.pdf</p> <p>FAHRENHEIT www.cdc.gov/vaccines/covid-19/info-by-product/moderna/downloads/temp-log-freezer-storage-fahrenheit.pdf</p> <p>Refrigerator Vaccine Storage Temperature Log</p> <p>CELSIUS www.cdc.gov/vaccines/covid-19/downloads/refrigerator-storage-logger-celsius.pdf</p> <p>FAHRENHEIT www.cdc.gov/vaccines/covid-19/downloads/refrigerator-storage-logger-fahrenheit.pdf</p> <p>Moderna Resource: Storage and handling guidance www.modernatc.com/covid19vaccine-eua/providers/storage-handling</p>

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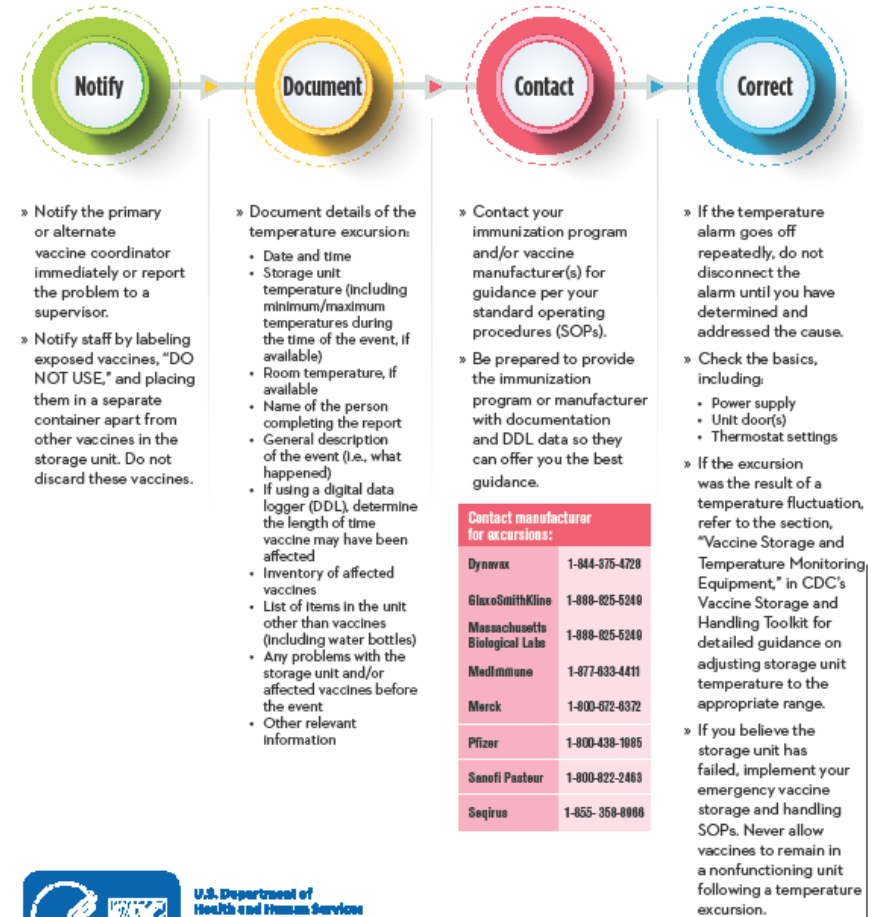
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SOUTH DAKOTA DEPARTMENT OF HEALTH

Handling a Temperature Excursion in Your Vaccine Storage Unit

Any temperature reading outside ranges recommended in the manufacturers' package inserts is considered a temperature excursion. Identify temperature excursions quickly and take immediate action to correct them. This can prevent vaccine waste and the potential need to revaccinate patients.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention





**SOUTH DAKOTA IMMUNIZATION PROGRAM
VACCINE EXPOSED TO ABNORMAL TEMPERATURES WORKSHEET**

DATE: ____ / ____ / ____

PROVIDER NUMBER:	FACILITY NAME:	CONTACT PERSON:	PHONE NUMBER:
1) Refer to SOUTH DAKOTA IMMUNIZATION PROGRAM POLICY #04 – VFC Vaccine Exposed to Abnormal Temperatures. Contact the Immunization Program to report the incident, and complete this worksheet for ALL temperature excursions.			
2) Please Explain the Incident: _____ _____ _____ _____ _____			
3) What is the current ROOM temperature, if available? _____ °C/F		4) What is the current temperature of the affected storage UNIT? _____ °C	
5) Vaccine was exposed to temperatures that were too: HIGH LOW		6) How long was the vaccine out of normal temperature range? _____ Hours	
7) What was the max/min abnormal temperature recorded on the Digital Data Logger? _____ °C		8) PRINT DIGITAL DATA LOGGER REPORT	
9) Was vaccine moved to an alternate location? YES NO		10) Was temperature monitored continuously with a Digital Data Logger during relocation? YES NO	
11) Where was vaccine moved to? _____			
12) Contact the manufacturers of each exposed vaccine. Complete the table on opposite page. Use multiple sheets if necessary.			
13) Did the temperature excursion result in any vaccine wastage? YES NO If YES, refer to SOUTH DAKOTA IMMUNIZATION PROGRAM POLICY #07 – VFC Vaccine Wastage & Return and Monthly Vaccine Wastage Report. All vaccine wastage due to exposure to abnormal temperatures is eligible for return to McKesson, except <u>partially used</u> multi-dose vials (e.g. Influenza, Polio).			
14) Submit completed Worksheet to SD Immunization Program. Check and include the following, if applicable:			
<input type="checkbox"/> Did you include a copy of the Digital Data Logger report recording the incident (Questions 4-8)?			
<input type="checkbox"/> Did you include a copy of the Digital Data Logger report recording temperatures during relocation, if applicable (Question 10)?			
<input type="checkbox"/> Did you include a Monthly Vaccine Wastage Report, if applicable, listing all vaccines that were compromised due to the incident (Question 13)?			

Manufacturers' Phone Numbers | GSK: 1-866-475-8222 | MERCK: 1-800-672-6372 | SANOFI PASTEUR: 1-800-822-2463 | PFIZER: 1-800-999-9384
Mail this form to: South Dakota Department of Health - Immunization Program - 615 E. Fourth St. - Pierre, SD 57501 | Phone: (605) 773-4963 with questions.

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Moderna Vaccine

- CDC guidance for pre-drawn syringes comes from Moderna
- If pre-drawn syringes are used, consider the following manufacturer released information supporting stability data of vaccine pre-drawn into syringes:
- According to the Chemistry, Manufacturing and Control (CMC) department at Moderna, pre-drawn syringes can be either stored in the refrigerator at 2° to 8°C (36° to 46°F) or at ambient room temperature at 15° to 25°C (59° to 77°F) provided they are administered within 6 hours of the first time the source vial is punctured

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Join Moderna for a Webinar: Important Information for Healthcare Providers about Moderna COVID-19 Vaccine. There will be no continuing education credits offered.

- **February 10 at 2:00 PM CST** | [Register](#)
- **February 17 at 12:00 PM CST** | [Register](#)

Pfizer-BioNTech Training:

- <https://www.cvdvaccine.com/>

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Reminders: Ancillary Kits

- Issues with ancillary supply equipment should also be reported to FDA.
- Encouraged to report any issues with equipment in the ancillary supply kits.
- This link provides the information on how to file the report.
 - <https://www.fda.gov/safety/reporting-serious-problems-fda/how-consumers-can-report-adverse-event-or-serious-problem-fda>

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COVID19 Vaccine Finder Update

- COVID-19 vaccine supply is still limited
 - data reported will only be used for vaccine inventory information—not as a resource to help the public find vaccine.
- When vaccine is more widely available
 - Providers will be notified when public-facing website will be turned on to show COVID-19 vaccination locations.
 - Will allow the public to know where they can go to receive a COVID-19 vaccination.
 - Providers will be able to choose whether their location is displayed on the website.
 - Specific inventory information will not be available to the public.

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SOUTH DAKOTA DEPARTMENT OF HEALTH

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